

# INDIAN MEDICAL ASSOCIATION



# IMANEWS

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#### **NP & HSG ACTIVITIES**















**Dr. J. A. Jayalal** National President, IMA

Dear Friends,

Season's Greetings!

I took over as National President, IMA last year during the 81stAnnual meeting of the Central Council held on 28th December 2020 at Chennai (TN). It seems that it was yesterday only, time flies away and you feel that there is a lot more to be done. Now when I am on the verge of finishing my tenure and retrospect the work done in the last year, it gives me immense satisfaction that we have achieved a lot on many issues and were able to solve the problems before the fraternity to our satisfaction.

On retrospection, I feel that although we have been able to achieve substantial success in our endeavors as promised during my Presidential Address when I took over as National President, there is still a need to follow-up. I am extremely confident that the new team is fully capable of coming up to the expectations from them and wish them all the success.

I will be failing in my moral responsibilities if I do not admit and admire the support of my dynamic Secretary, Dr. Jayesh Lele and all National Office Bearers who stood with me all the time.

While I step down from the responsibility of National Presidentship of IMA, I believe I have been able to make a respectable place in the hearts of all my leaders and membership.

I thank all the leaders and membership of IMA for bestowing upon me their love, affection, kindness and support and request them to continue their blessings on me. I offer my uninterrupted services to our beloved Association which is extremely close to our hearts.

The true strength of IMA lies in our unity and common commitment to the betterment of the medical profession. Little has been achieved and much has to be done through Purity of Profession – Parity in Healthcare.

Wishing all of you a Happy and Prosperous New Year!

Long Live IMA! Jai Hind!!



Dear Friends,

Greetings from Indian Medical Association HQs!

As the year is coming to an end it seems that time has flown fast since we took over the office of the IMA and I peep into the functioning of last one year. I feel that we have achieved a lot but is still a long journey.

This month saw an increase in IMA life members' by nearly 12000 members, and still, we are receiving the Life membership forms. The response has been tremendous and very encouraging.

On 19th we had a unique award ceremony wherein IMA recognized 22 National IMA members who have excelled in entrepreneurship in the field of educational development. They had medical education as an important factor in either medical education college or PG institute. The event was very successful and many had seen the IMA building for the first time.

19th evening also witnessed the very successful MEGAFEST 2021, cultural event which was the finals of the two cultural events Musical and Dancing competition for the IMA members. Dr Archana Pate, Chairperson Cultural Standing committee and her team had done tremendous efforts to make elaborate arrangements for these 2 competitions. The events were super events for the doctors and it is once again shown that the doctors are so much talented in other fields as well.

NABH conducted a 5 days Assessor's training program for the IMA members. 45 members across India attended the training and all the participants were very happy—that IMA HQ facilitated the entire arrangements for them.

The PG admissions have become a nightmare for the students and in spite of the NEET PG results have for more than 3 months the admissions are yet to start. This very important matter is sub-judice and needs to be solved at the earliest.

Finally, looking forward to meet you all in Patna where my beloved brother Dr. Sahajanand Singh is going to take over the mantle of leadership during IMA NATCON 2021 which will be held on 27 and 28 December 2021. IMA Bihar state has done very elaborate arrangements for the mega event. And that will be the time for us to Cherish, enjoy, share and discuss the challenges of Indian Medical Association and charting out our ways and means for the coming years.

I am looking forward to get your continuous support and hand holding in all our endeavors

Wishing you all a very Happy New Year 2022.

Long Live IMA!!

Dr Jayesh Lele

7. M. Lele

Honorary Secretary General, IMA

To,
All the State Presidents and Secretaries

# REGARDING LETTER TO STATE PRESIDENTS AND SECRETARIES FOR INFORMING THE DECEASED MEMBERS OF THEIR STATE FOR COVID MARTYRS FUND

Dear Doctor,

As you are aware that IMA HQs has instituted a Covid Martyr Fund to help the deserving families of Covid martyrs amongst our members.

IMA has already donated Rs. 10 lakhs each to the 25 family members of the deceased member who died due to Covid-19.

You are hereby requested to update the Covid martyrs list of your state latest by 15th December 2021 and also identify deserving families requiring help. This task may be prioritized. The donations to the IMA Covid Martyrs fund will be eligible for Income Tax exemption as per 80G provisions.

I am resending the operational guidelines and revised application form for your convenience and early action.

Thanking you and with kind regards, Yours sincerely,

Dr. Jayesh Lele Honorary Secretary General, IMA

Copy to: National President, IMA

#### **OPERATIONAL ASPECT**

The financial assistance proposed by this dedicated fund is basically intended for the family members of IMA Covid martyrs who have a dire need for support and care.

The quantum of financial assistance will vary from case to case depending on the situation of the family. An unemployed young housewife with school going children and dependant parents will merit the most benevolence and quantum of assistance.

The following documents are required:-

- 1. Application form duly filled in
- 2. Xerox copy of Life membership certificate. IMA HQ office will assist in ascertaining membership and issuing a duplicate copy if required.
- 3. Death certificate from competent authorities.
- 4. Recommendation letter from the local or state branch President endorsing or certifying the Covid death and active medical practice during the epidemic.
- 5. (a)Income tax returns of the immediate family members (wife and children. (b)Copy of income tax returns of the deceased in the previous three years.
- 6. Legal heir certificate/s of the beneficiaries.



### **INDIAN MEDICAL ASSOCIATION**





Name of the deceased doctor	
Date of Death	
IMA Membership Number	
Deceased PAN Card No.	
Deceased Aadhaar Card No.	
Deceased Residence Address	
Where was the Covid Warrior working?	
Name and address of hospital/ medical centre/ healthcare facility	
Deceased Job Title	
Name of IMA State/Branch	
Name of the Legal heirs/family members	
Name of the applicant and relation with Covid Martyrs	
Applicant Aadhaar Card	
Applicant PAN Card	
Self-Declaration by the Applicant	
Address for correspondence	

Applicant E-mail				
Applicant Mobile Number				
Details of the family and its current				
status				
Is the Covid Warrior entitled to				
pension from the employer? If yes,				
when does the pension commence?				
Please tick correct option below				
and insert details				
Has the Covid Warrior's family been				
reimbursed for expenses related to				
medical treatment of Covid? Please				
tick correct option below and insert				
Did the Covid Warrior have his/ her own /personal life insurance? If yes, please provide details	Lucia Santifaci			
	Insurance Provider			
	Policy No.			
	Insurance Amount (Rs.)			
Family Income and Expenses	1. Monthly Gross Income	(Rs.)		
	2. Monthly Gross Income by Family	(Rs.)		
	3. Estimated Value of Assets owned by the Covid Martyrs and the Family			
	(Rs.)	,		
	(ns.)			
	4. Total Monthly Expenses of the Family	(Rs.)		
	5. Total Amount available for use by the Family, per month:			
	(Rs.)			
	:			

#### Note:

- Please attach an additional page if there is other information about your current financial situation that you would like us to know, such as a financial hardship, seasonal or temporary income, debt or personal loss, etc.
- This Form and any financial aid granted hereunder shall be subject to the Terms and Conditions provided by the IMA HQs.

#### **Declaration of authenticity of Information:**

I confirm that all the information provided by me in this application Form A to MGFF is true, genuine and accurate. I will be wholly accountable if any information provided is found to be incorrect or falsified.

(Signature of Applicant)

#### Please attach scanned copies of the following documents:

- 1. Copy of Birth Certificate (if available).
- 2. Copy of death certificate stating the reason of death as due to Covid 19.
- 3. Declaration of authenticity signed by applicant and also duly signed and endorsed by local registered NGO (with NGO Registration number) or Local head of Medical Council or Local Head of Police Station where Covid Warrior was employed.
- 4. Mark sheet/report card (latest) of the children/ issue of the Covid Warrior.
- 5. Bank Account details of each dependent being child/ parent/ widow/ sibling (Bank account number, scanned copy of cancelled cheque).
- 6. Income Tax returns filed by the Covid Warrior and the Family (for all earning members) for the last 3 (three) years or the Income Certificate issued by the District Revenue Authority.
- 7. In case the Aadhar Card of the Covid Warrior is unavailable, please provide us with a Copy of his/her passport, ration card, or voter ID card for verification.

#### For Local Branch President/ Secretary:

The above details have been verified by me and found correct. The deceased died due to Covid 19 and was in active practice when the infection occurred.

For questions or concerns related to this form, please contact us at hsg@ima-india.org

#### **Questions/Information:**

**Local Branch:** 

Date:			

**President / Secretary Name** 

To
Dr. Minu Bajpai
Honorary Executive Director
National Board of Examinations in Medical Sciences

# SUBJECT: REQUEST FOR STUDYING DIPLOMA IN FAMILY MEDICINE UNDER SPECIAL CATEGORY

Dear Sir,

Greetings from Indian Medical Association!

On behalf of IMA, which is the largest professional body in India with 3.5 lacs doctors we bring to your kind notice Sir, IMA has more than 50,000 General Practitioners spread across the various corners of the country, they are serving in the society as a primary health care physicians and contributing lot of health care delivery system. Knowledge empowerment and new skills adoption are mandatory need for these GPs. However, with their socio family conditions, we will not be able to dedicate time for regular structure medical education courses and need work based learning education model. It is a befitting innovation by NBE under your leadership to provide diploma courses in various disciplines. We fully welcome that idea. In addition to that, we request you to please include Family Medicine for Physicians as one of the PG Diploma Course in your arena.

We also bring to your notice as most of these aspirant candidates are at age of 40-50, practically it may not be feasible for them to sit for the NEET PG Examination. Their rich practical experiences, need to be respected, hence, we propose a special screening test apart from the Neet, shall be introduced for this course alone and since the family practice more depends on the out patients services, the course curriculum, structure and duration shall be trailer made to suit the OPD services.

Sir, we are herewith attaching the Concept Note prepared by the Committee constituted by IMA headed by Dr. Ved Prakash Mishra, Dean, IMA Standing Committee for Academic And Accreditation Board for your perusal and seek your positive intervention and early introduction of this course which will benefit most of the GPs. IMA College of General Practitioners Wing will serve as a Nodal Centre for conducting these courses at various appropriate centres across the country as per the guidelines and norms laid down by NBE.

We also submit our willingness to take part in these structured courses of NBE and will be available wholeheartedly in any academic activities.

Looking forward to hear from you soon.

Thanking you and with kind regards,

Yours sincerely

Dr. J.A.Jayalal National President, IMA То

All Concerned Members (Ex-officio & Members of the Adhoc Committee)

Dear Sir,

Greetings from Indian Medical Association (HQs.)!

We are happy to share that National Health Authority (NHA) has released a consultation paper on Proposed Health Data Retention Policy (HDRP) under the ambit of the Ayushman Bharat Digital Mission (ABDM) which describes NHA's current approach related to data retention, and how a health data retention policy for ABDM stakeholders will help the healthcare ecosystem.

This Guideline/Policy has been envisioned to minimize risks associated with personal health data and to maximize benefits from the usage of this data by ensuring that data retention guidelines are in sync with all applicable legal and regulatory compliances. The same is attached for your kind reference.

In this regard, National President, IMA is pleased to constitute an Adhoc Committee on the Proposed Health Data Retention Policy (HDRP) under the Ayushman Bharat by National Digital Health Mission.

#### **Ex-Officio**

Dr. J. A. Jayalal Dr. Jayesh Lele Dr Anil Goyal

National President, IMA Hony. Secretary General, IMA Hony. Finance Secretary, IMA

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The above Committee will discuss and formulate the recommendations of IMA on this proposed policy. Thanking you and looking forward to your timely response

With best regards,

Dr. J A Jayalal National President, IMA To Shri Mansukh Mandaviya Hon'ble Minister of Health & Family Welfare Ministry of Health & Family Welfare

# REQUESTING FOR APPROVAL OF THIRD DOSE OF VACCINATION FOR DOCTORS AND OTHER FRONT LINE HEALTHCARE WORKERS

Respected Sir,

Greetings from Indian Medical Association (HQs.)!

We wish to bring to your kind notice that healthcare workers of this country, led by the modern medical doctors, have done exemplary services during the Covid pandemic and also the innovative vaccination programme launched by the Hon'ble Prime Minister of India.

IMA doctors were the one who have taken the vaccination on the day-1 of the launch of vaccination drive and taken all steps to make vaccine reach to the maximum possible people. We whole heartedly congratulate the efforts of Health Ministry under the leadership of our Hon'ble Prime Minster to reach 1.2 billion people vaccinated.

At this juncture, we came to know that 24 croers of vaccination are kept in the cold storage as there is sluggishness of speed with which the vaccination programme was carried out. It is also noted that huge bulk of vaccination is also kept in the private hospitals in anticipation of distribution, however, which has not happened due to various difficulties including the cost of vaccine.

There is a growing demand, based on scientific evidences, the healthcare workers had in principle taken the vaccination in the month of January and February, 2021, the humoral antibody level is low at this point though they still have a cellular immunity. When healthcare workers are usually contacted physically with covid victims, they are exposed to heavy load of virus, hence, need the high immunity to overcome viral load. It was evident in the first and second wave, due to this heavy load of viral exposure, more than 2,000 doctors were died. We also bring to your notice that the people who are either under chemotherapy or suffering from severe diabetes also need additional dose of vaccination to initiate the immunity.

We bring to your kind notice that the overall requirement of the vaccine for supporting the healthcare workers and people who are immune compromised with additional dose will be only 4-5 croers.

As we have sufficient supply chain and there are sufficient evidences on the need of additional dose, IMA requests the Health Ministry to consider this and make it possible for every healthcare provider to get the third dose of vaccination officially.

We also request you to reconsider the gap between the first and second dose which can be reduced and also huge pool of vaccine which has kept in the private hospitals shall be rechannelled.

Looking forward to have your beneficial reply.

With kind regards,

Yours sincerely,

Dr. J.A.Jayalal National President, IMA

Shri Rajesh Bhushan Secretary, Health & Family Welfare Government of India, New Delhi

Dr. Suresh Chandra Sharma Chairman, NMC

Dr. Aruna V Vanikar President, Under Graduate Medical Education Board (UGMED) vanikararuna@yahoo.com

Sub: ISSUE REGARDING ECFMG WITH RELATION TO APPROVAL OF INDIAN MEDICAL GRADUATES (MBBS) IN THE UNITED STATES AFTER 2024 REGARDING

Respected Sir/Madam,

Greetings from Indian Medical Association HQs!

We wish to bring to your kind notice about the Notification issued by the World Federation for Medical Education (WFME) in which it is stated only those medical graduates from the institutions accredited by WFME will be allowed to sit in the USMLE (Medical Licence Examination), which is a mandatory exam for anyone to work in US.

As per the directive of Educational Commission for Foreign Medical Graduates (ECFMG), it is mandatory for all the medical institutions to be included in the Directory of ECFMG for making them eligible to apply for the US Medical Licence Examination. For this the institution must be accredited by the World Federation of Medical Education (WFME) the only accepted accreditation agency by ECFMG.

We also bring to your notice that it is informed from the ECFMG, the Indian Medical Institution and NMC have not applied for the ECFMG Certification even after repeated Notifications from the ECFMG to the Health Ministry and NMC.

We request you to kindly look into the matter as it is going to affect thousands of students who will be applying for international career.

Thanking you with kind regards,

Yours sincerely,

Dr. J.A. Jayalal National President, IMA Dr. Jayesh Lele Hony. Secretary General, IMA

Copy to: President, ECFMG

# OFFICE ORDER REGARDING ASSUMPTION OF CHARGE OF HONORARY EXECUTIVE DIRECTOR-NBEMS FOR YOUR KIND PERUSAL

То

Dr. Minu Bajpai

Honorary Executive Director

National Board of Examinations in Medical Sciences

Dear Sir,

Greetings from Indian Medical Association (Hgs.)!

We are happy to note that you have been taken charge as Executive Director of the National Board of Examinations in Medical Sciences.

Your long tenure as an academic legendary person in the field of Paediatric surgery and your vast experience in administration in AIIMS, will definitely help the NBE to progress further. IMA extends its whole-hearted support to the NBE and its achievements. IMA requests you to kindly take special care to inform the progressive changes which are made in the examination pattern to the concerned students atleast a year ahead instead of making changes just prior to the examinations.

IMA is also concerned about the long delay in PG admission which is unfortunately held up in the Supreme Court of India. In many institutes, one batch of PG students are missing. NBE should guide and help those institutes to come over this shortage.

Wishing you all the best in all your endeavors.

Yours sincerely, Dr. J.A. Jayalal National President, IMA

7.12.2021

To, All State and Local Branch Presidents and Secretaries, IMA

Sub: Request from IMA HQs - Not to give any recommendation in the case of CPA-2019

Dear Sir,

Greetings from Indian Medical Association Has!

IMA HQs is filing a petition in Supreme Court in the matter of Consumer Protection Act 2019.

As per the discussions held in CWC meeting on 9th and 10th November 2021 at Guwahati and recommendations of the IMA Standing Committee for Action held on 6th December 2021, it was decided since this is a central issue related to the entire country, IMA HQs will take up this matter in appropriate manner.

Hence, you are requested not to give any recommendations to anybody in this regard without confirmation from IMA HQs. If any individual member is filing with the name of IMA or any branch give letter of confirmation with the individual member, it will be difficult for IMA HQs to file the case separately in Supreme Court.

Thanking you, Yours sincerely,

To, Smt. Nirmala Sitharaman Hon'ble Finance Minister Ministry of Finance Govt. of India

Subject: SEEKING AN APPOINTMENT TO DISCUSS ON NATIONAL HEALTH BUDGET

Respected Madam,

Greetings from Indian Medical Association HQs.!

Indian Medical Association is the largest professional body with 3.5 lakhs modern medicine doctors, proactively involved in the healthcare delivery of the country.

We wish to bring to your kind notice that the members of IMA have pro-actively participated in the COVID care, Vaccination Project and many other altruistic beneficial health care projects launched by Govt. of India. IMA also thank the Finance Ministry for allocating more funds for the Health Care Sector in the Budget, 2021.

It is customary, the Finance Ministry holds various consultations with organizations and industries to decide on the Budget provisions in connection with their respective fields. In the Post COVID era, infrastructure development, manpower augmentation and getting prepared towards the wellness of the people are the mandatory pillars of over all development of our country.

IMA has constituted a body to prepare our proposal for your kind consideration with a request to kindly incorporate it in our National Health Budget, all these mandatory pillars related to health. The health of our nation depends upon the health of healthcare professionals too.

Hence, IMA seeks your kindness to allot sometime to us to meet you in person so that we can present our views and express our concern with regard to the National Health Budget.

It will be of great help to the country if the Health Budget is given priority by allotting more funds, more avenues and much more importance to the proactive mission of our Hon'ble Prime Minister wellness through Ayushman Bharat.

Looking forward to meet and hear from you.

Thanking you and with kind regards,

Yours sincerely

Dr. J A Jayalal National President, IMA

Shri Mansukh Mandaviya Hon'ble Union Minister of Health & FW and Chemicals and Fertilizers Govt. of India

Respected Sir,

Greetings from Indian Medical Association HQs!

Ever since you have assumed the charge, on many occasions, IMA has written for an appointment with your goodself, so that we can discuss our issues on the Vaccination Project launched by our Hon'ble Prime Minister of India along with our mission to carry on this to the last man of our country. It should be noted that IMA is the only Organization which has pro-actively supported the vaccination project when it was launched on 16th January 2021 by our Hon'ble Prime Minister and all the leaders of IMA had taken the vaccination at that time as a role model of the Association.

IMA has also actively participated in the Digital Health Mission Programme launched by the Hon'ble Prime Minister and various community welfare projects of Govt. of India. IMA on its own is also running Safe Motherhood Project with an objective to make India Anaemia Free. The mitigation of diabetes campaign also the Swayam Project which envision to bring awareness about self-breast examination for early detection of Breast and Cervical Cancer examination with a target of 1 billion women of this country.

IMA is actively involved in continuous development of our doctors from all parts of the country and continuously working for recarnation of family medicine in this country.

At this juncture, we earnestly request you to give us an appointment to meet and share our concerns on behalf of 3.5 lakh doctors of this country at your convenient date and time.

Thanking you with kind regards,

Yours sincerely,

Dr. J.A. Jayalal National President, IMA

To,
The Presidents/Secretaries of
All State/Local Branches of IMA

#### Sub: Extension of Membership Drive for 15 Days

Greeting from the Indian Medical Association!

Thank you for your interest and motivations to bring more members to IMA fold during this time of membership campaign with concession in membership fee (HFC).

We have received multiple request form various states especially North East and also in view of the present flood situation mainly in South India, it is decided to extended the membership campaign up to 15th December 2021, with concession in the membership fee (HFC).

We believe all of you are aware that annually 85000 new graduates are coming out from the Medical College. Please try your best to ensure everyone in your branch locality are coming under the protective arms of Indian Medical Association.

Kindly note all application received up to December 15th to the State HQs must be uploaded in our portals on or before 27th December 2021. No application received after that will be accepted with concession HFC.

HFC Share up to 15th December 2021.

Life Single member : Rs. 5000 Life Couple member : Rs. 7500 Half Couple life member (couple conversion) : Rs. 2500

Thanking you and with regards

Dr. Jayesh M. Lele Hony. Secretary General, IMA

07.12.2021

To,
The Chairman,
Central Pollution Control Board,
New Delhi.

Ref: Records of Discussion' of the meeting held with the delegation of Indian Medical Association (IMA) under the Chairmanship of Hon'ble MEFCC on 06.09.2021 regarding Bio-medical Waste Management Rules, 2016 and other issues related to Health Care Facilities.

#### Respected Sir,

Greetings from Indian Medical Association, largest association of doctors of modern medicine in the world! We are thankful to your team and MoEFCC team for giving us a patient hearing on 6th Sep 2021.

As per the above discussion, a few actionable points were assigned to CPCB for further action.

In regards to that, we will like to recall your attention to explanation by JS (HMSD) that Healthcare Establishments have been subcategorized in April 2020 into non-industrial sectors with a view to obtain exemption for such activities in areas where industrial operations are banned or highly regulated.

We request your good self to issue this explanation on why this sub-categorization has been done in a letter to State Pollution Control Boards and State Governments. This will ease working for nearly 3.8 lakh of our members.

"This is to bring to your notice that by its notification of 30th April 2020, Central Pollution Board has subcategorized Healthcare Establishments as Non-Industrial operations. This gives an exception to Healthcare Establishments to operate in areas where industrial operations are banned or highly regulated."

Thanking you for your cooperation,

Dr. J A Jayalal National President, IMA

To, The Chairman, Central Pollution Control Board, New Delhi.

Records of Discussion of the meeting held with the delegation of Indian Medical Association (IMA) under the Chairmanship of Hon'ble MEFCC on 06.09.2021 regarding Bio-medical Waste Management Rules, 2016 and other issues related to Health Care Establishments, and further meetings held with CPCB.

Respected Sir,

Greetings from Indian Medical Association, largest association of doctors of modern medicine in the world!

We are thankful to your team and MoEFCC for all the support extended always.

As per the above meetings and further discussions held with CPCB, we will like to draw your attention to the following regarding Management of the Water Discharge from HCEs.

Sir, it has been discussed and agreed upon in the above meetings by the CPCB authorities beyond any doubt that:

- a) Bedded HCEs already connected with public sewerage system having a terminal Sewage Treatment Plant (STP) may discharge their effluent to the public sewerage system after primary treatment without any further treatment (as mentioned in amended Bio Medical Waste Rules 2018)
- Such HCEs need not install STP/ETPs on their premises (as clarified by CPCB letter dated 29/12/2021).
- c) These HCEs need not to submit the test reports of their combined discharge (as it will be treated by the terminal STP).

Sir, in light of the extensive discussions in the above meetings we request you to issue fresh guidelines containing the above to all SPCBs/PPCs so that there remains no ambiguity in this matter. Further changes may kindly be made in the Act as needed.

"Liquid waste Parameters"

Note-

- 1. Above limits are applicable to the occupiers of Health Care Facilities (bedded) which are either connected with sewerage network without terminal sewage treatment plant or not connected to public sewers.
- 2. For discharge into public sewers with terminal facilities, the general standards as notified under the Environment (Protection) Act, 1986 (29 of 1986) shall be applicable.
- 3. Health Care Facilities having less than ten beds shall have to install Sewage Treatment Plant by the 31st December, 2019.
- 4. Non-bedded occupiers shall dispose infectious liquid wastes only after treatment by disinfection as per Schedule – II (6) of the principal rules.".

Should be replaced with:

"Liquid waste Parameters"

- 1. Above limits are applicable only to the occupiers of Health Care Facilities (bedded) which are either connected with sewerage network without terminal sewage treatment plant or not connected to public
- 2. Non-bedded occupiers shall dispose infectious liquid wastes only after treatment by disinfection as per Schedule – II (6) of the principal rules.".

Hoping for an early response Thanking You for your cooperation,

> Dr. J A Jayalal National President, IMA

To
The Chairman,
Central Pollution Control Board,
New Delhi.

Ref:Records of Discussion of the meeting held with the delegation of Indian Medical Association (IMA) under the Chairmanship of Hon'ble MEFCC on 06.09.2021 regarding Bio-medical Waste Management Rules, 2016 and other issues related to Health Care Facilities, and further meetings held with CPCB

#### Respected Sir,

Greetings from Indian Medical Association, largest association of doctors of modern medicine in the world! We are thankful to your team and MoEFCC for all the support extended always.

As per the above meeting and further discussions held with CPCB, we will like to draw your attention towards the fact that only about 3-4% of Healthcare Establishments have a website of their own. Rest 96-97% of HCEs do not have a website of their own. Building and maintaining it for every individual HCE will be a herculean task and will involve unnecessary financial burden on them.

Moreover, CPCB will not be able to assess all these different sites for getting a consolidated report. Thus it was proposed to have a Central software/ website to be developed by CPCB on which real time monitoring of waste generated, collected and disposed off can be done. Same was agreed to by both CPCB and Ministry and CPCB had assured that it will be launched very soon.

In context of above developments, we request you to delete the need for all HCEs to maintain and upload data on their own websites. Accordingly, we request you to make changes in the Bio-Medical Waste Management Rules, 2016.

"4. (n) maintain and update on day to day basis the bio-medical waste management register and display the monthly record on its website according to the bio-medical waste generated in terms of category and colour coding as specified in Schedule I"

#### Should be replaced with:

- "4. (n) maintain and update on day-to-day basis the bio-medical waste management register and upload the monthly record on the website of CPCB according to the bio-medical waste generated in terms of category and colour coding as specified in Schedule I, either manually or automatically through Barcode labelling"
- "4. (p) all the health care facilities (any number of beds) shall make available the annual report on its website within a period of two years from the date of publication of Bio-Medical Waste Management (Amendment) Rules, 2018"

#### Should be replaced with

- "4. (p) all the health care facilities (any number of beds) shall make available the annual report on the website of CPCB whenever it becomes operational."
- "4. (I) shall display details of authorisation, treatment, annual report etc on its web-site"

#### Should be replaced with

- "4. (I) shall upload data on the website of CPCB as asked for from time to time."
- "13. (4)The Annual Reports shall also be available online on the websites of Occupiers, State Pollution Control Boards and Central Pollution Control Board."

#### Should be replaced with

"13. (4) The Annual Reports shall also be available online on the website of Central Pollution Control Board."

In FORM-II, 1. (vi) Website Address, should be deleted.

In FORM-IV, (vii) URL of Website, should be deleted.

Thanking you for your cooperation,

Dr. J A Jayalal National President, IMA

To,
The Chairman,
Central Pollution Control Board,
New Delhi.

Ref: Records of Discussion' of the meeting held with the delegation of Indian Medical Association (IMA) under the Chairmanship of Hon'ble MEFCC on 06.09.2021 regarding Bio-medical Waste Management Rules, 2016 and other issues related to Health Care Facilities.

Respected Sir,

Greetings from Indian Medical Association, largest association of doctors of modern medicine in the world!

We are thankful to your team and MoEFCC team for giving us a patient hearing on 6th Sep 2021. As per the above discussion, a few actionable points were assigned to CPCB for further action.

- CPCB to consult with SPCBs/ PCCs to bring out synergy among various 'forms' used for seeking CTO/ CTE/BMW authorisation under various rules and revise the same, if required.
- CPCB may issue an advisory to SPCBs/ PCCs asking them to de-link the need of considering 'turnover/ capital investment' while deciding upon Consent fee.
- Ministry to promptly explain and clarify the rules whenever there is any doubt in this regard among various stakeholders.
- CPCB may seek, compile and examine information on 'operational model of CBWTFs' through State Health Department/ SPCBs/ PCCs.

In view of the above points, there is need to arrange meeting between various stakeholders including MoEFCC, CPCB, State PCBs and IMA, either offline or online, at the earliest.

IMA is ready to provide Conference Halls at its Headquarters at IMA House, ITO, New Delhi voluntarily or to arrange for "Online or Hybrid meeting" of stakeholders. An early response in this regard will be highly appreciated.

Thanking you for your cooperation,

Prof. Dr. J A Jayalal National President, IMADr. Jayesh Lele Honorary Secretary General, IMA To, Shri Mansukh Mandaviya Hon'ble Minister of Health & Family Welfare Ministry of Health & Family Welfare Government of India

#### Regarding - IMA caution on the impending Omicron Disasters in India, But No Need To Panic

Respected Sir,

Greetings From Indian Medical Association HQs.!

The new variant of concern Omicron covid virus is spreading across and percolated to more than 40 countries across the world starting from South Africa. India is seeing exponential rise of Omicron cases in double digits within a week's time. All the major States have now confirmed the presence of cases, and it will be bound to increase further. With the scientific evidence available and the experience noted in countries of origin like South Africa, Germany, Tanzania, etc. it is evident that the new virus Omicron will have high Penetrability and will affect more people. At this time when India is limbing back to normalcy, this is a great setback and concern. If we are not taking adequate measures of preventing transmissibility, we may enter into a massive third wave.

However, on the positive side, India with the pro-active leadership of the Hon'ble Prime Minister has crossed 1.26 billion vaccinations by which more than 50% of our adult population are being vaccinated at least with one dose. Vaccination all over the world has been proven, it will prevent severe forms of infection especially for the Omicron infection too. So, if we can altruistically focus on war footing on vaccination, India can definitely overcome the impact of Omicron causing serious disasters to this country. Hence IMA earnestly appeals to everyone concerned to take the vaccination as priority agenda and focus attention to reach all the unreached and also ensure the 2nd dose is given to all the needy people who are yet to get it.

At this juncture, IMA also appeals to the government on the eve of the impending third wave, to officially announce the health care front line workers and immune-compromised individuals to be given an additional dose to augment the immunity.

Omicron has proved to be less virulent in producing severe infections but definitely 5 to 10 times more potent in transmissibility than Delta Virus. Hence It is necessary for the Government and all Stakeholders to take appropriate measures to control the transmissibility of this infection, by enhancing immunization.

IMA also demand and appeal, in this precarious situation, everyone should avoid and put on hold any massive social gathering on any pretext of religious, political, or academic events and also ensure wearing mask and hand washing as the Covid appropriate behaviors. Let us not loosen our grip on the proactive protective measures.

IMA does not support the imposition of a travel ban; However, we appeal to all the public to avoid, avoidable and unnecessary travel especially pleasure Tourism and social gatherings. All our public transport systems including Air and Train should strictly adhere to the code of covid protocol.

It is also noted that with Omicron in most of the African Countries there is a sudden increase in children who are getting more infected and admitted to Intensive Care Units. This possibility of enhancing infection in the Paediatric age group is also inevitable, hence IMA appeal to all the schools and colleges shall strictly adhere

#### INDIAN PHARMACOPOEIA COMMISSION

Ministry of Health & Family Welfare, Govt. of India Sector-23, Raj Nagar, Ghaziabad-201002

MINUTES OF THE IPC – IMA Meeting

Date : 10th November 2021 at 02:15 PM – 3:15 PM

Mode of Meeting : Virtual (GoogleMeet)

A Meeting between Pharmacovigilance Programme of India (PvPI) and Indian Medical Association (IMA) was held on 10th November 2021 through Video Conferencing and the following members attended the same:

- 1. Dr Rajeev Singh Raghuvanshi, Secretary-cum-Scientific Director, IPC.
- 2. Dr. Jai Prakash, Officer-in-Charge, PvPI
- 3. Dr. Vijay Venkataraman, Chairman, IMA Standing Committee for Pharmacovigilance
- 4. Dr. Nilima Kshirsagar, Member, IMA Standing Committee for Pharmacovigilance
- 5. Dr. Pooja Sharma, Member, IMA Standing Committee for Pharmacovigilance
- 6. Dr. Usharani Pingali, Member, IMA Standing Committee for Pharmacovigilance
- 7. Dr. Subhrojyoti Bhowmick, Member, IMA Standing Committee for Pharmacovigilance
- 8. Dr. Sachin Kuchya, Member, IMA Standing Committee for Pharmacovigilance
- 9. Dr. Shashi Bhushan, Senior Scientific Officer, NCC PvPI, IPC
- 10. Dr. R S Ray, Scientific Assistant, NCC-PvPI, IPC
- 11. Hammad Ali, Pharmacovigilance Associate, NCC-PvPI, IPC

#### Opening Remarks

Dr. Jai Prakash welcomed all the members of meeting and requested for their brief introduction. This was followed by a brief introduction of Members of IMA Standing Committee for Pharmacovigilance.

- Dr Rajeeev Singh Raghuvanshi opened the discussion on how NCC-PvPI can collaborate further with IMA to take PvPI to the next level.
- He also raised his concerns that despite India having over 1.39 billion people, the actual number of reporting of ADRs to NCC-PVPI is considerably low. In response to this, Dr Sachin was informed that it is not possible to acknowledge every adverse event individually. Therefore we need to devise strategies to involve patient directly to report an ADR. Also, it should come as a professional responsibility to engage patient directly to report an ADR.
- Dr Sachin Kuchya suggested that the biggest lacunae in spontaneous reporting of ADRs are the underreporting and feedback of any reported ADR. He also suggested making ADR Mobile App better as Healthcare professionals these days are more tech savvy and can easily enter ADR data compared to time consuming filling of hardcopy of ADR form.
- Dr Pooja Sharma suggested PvPI to empower patients through awareness and sensitization programmes to increase the number of reporting. She also suggested that PvPI should develop a short Audio-Visual Presentation highlighting the activities of PvPI (preferably of 2-3 minutes) which can be displayed during conferences/awareness/Sensitization Trainings for Healthcare Professionals, Pharmacy students, nursing students etc.
- Dr Rajeeev Singh Raghuvanshi advised the members to suggest ways to involve patients directly in reporting of adverse drug reactions to PvPI.
- Dr Subhrojyoti Bhowmick suggested PvPI to involve Retail Pharmacists, Nursing Staff to increase number of reporting.
- Dr Vijay Venkatraman recommended the Coordinators of ADR monitoring centers to involve PG students and interns to contribute to report ADR and urged PvPI to conduct random Audit/Scheduled audit for

# REQUEST FOR HONOURING COVID WARRIORS AND REMEMBERING COVID MARTYRS DURING THE REPUBLIC DAY CELEBRATION

To,

Shri Narendra Modi Ji Honourable Prime Minister of India

Respected Sir,

Greetings from Indian Medical Association!

Indian Medical Association joins hands with common man of our country in felicitating our Hon'ble Prime Minister of India for the immaculate implementation of vaccination against Corona and successfully sailing of our country through the pandemic.

We also bring to your kind notice that in this noble Mission, 3.5 lakh members of IMA belonging to modern system of medicine have voluntarily stood as the frontline warriors in both private as well as public health care facilities and played a crucial role in saving millions of lives from Covid and also meticulously inoculating vaccine for 136 Cr. of people.

It is customary that your goodself will recognize the soldiers of our country who have sacrificed their lives for the cause of the country and saved our country from the opponents in various military encounters during the Republic Day celebrations.

Managing the Covid Pandemic was also a war like situation and more than 2000 of our doctors have sacrificed their lives in this war against Covid.

Sir, it is our humble appeal to you to kindly recognize these Covid Martyrs and honour the Covid Warriors in the Republic Day Parade. We also request you to please also recognize the services of medical fraternity and include the doctors as Special Invitees in the official ceremony party hosted by the Republic India on that day.

With regards,

Yours sincerely,

Dr. J.A. Jayalal Hony. Secretary General, IMA Dr. Jayesh LeleNational President, IMA

Copy to:

Shri Amit Shah Ji, Honourable Minister of Home Affairs, GOI Shri Mansukh Mandaviya, Hon'ble Minister of Health & Family Welfare, MoHFW

#### IMA CAUTION ON THE IMPENDING OMICRON DISASTERS IN INDIA, BUT NO NEED TO PANIC

To,

Shri Mansukh Mandaviya Hon'ble Minister of Health & Family Welfare Ministry of Health & Family Welfare Government of India

Respected Sir,

Greetings from Indian Medical Association HQs.!

The new variant of concern Omicron covid virus is spreading across and percolated to more than 70 countries across the world starting from South Africa. India is seeing exponential rise of Omicron cases in double digits within a week's time. All the major States have now confirmed the presence of cases, and it will be bound to increase further. With the scientific evidence available and the experience noted in countries of origin like South Africa, Germany, Tanzania, etc. it is evident that the new virus Omicron will have high Penetrability and will affect more people. At this time when India is limbing back to normalcy, this is a great setback and concern. If we are not taking adequate measures of preventing transmissibility, we may enter into a massive third wave.

However, on the positive side, India with the pro-active leadership of the Hon'ble Prime Minister has crossed 1.36 billion vaccinations by which more than 50% of our adult population are being vaccinated at least with one dose. Vaccination all over the world has been proven, it will prevent severe forms of infection especially for the Omicron infection too. So, if we can altruistically focus on war footing on vaccination, India can definitely overcome the impact of Omicron causing serious disasters to this country. Hence IMA earnestly appeals to everyone concerned to take the vaccination as priority agenda and focus attention to reach all the unreached and also ensure the 2nd dose is given to all the needy people who are yet to get it.

At this juncture, IMA also appeals to the government on the eve of the impending third wave, to officially announce the health care front line workers and immune-compromised individuals to be given an additional dose to augment the immunity.

Omicron has proved to be less virulent in producing severe infections but definitely 5 to 10 times more potent in transmissibility than Delta Virus. Hence It is necessary for the Government and all Stakeholders to take appropriate measures to control the transmissibility of this infection, by enhancing immunization.

IMA also demand and appeal, in this precarious situation, everyone should avoid and put on hold any massive social gathering on any pretext of religious, political, or academic events and also ensure wearing mask and hand washing as the Covid appropriate behaviors. Let us not loosen our grip on the proactive protective measures.

IMA does not support the imposition of a travel ban; However, we appeal to all the public to avoid, avoidable and unnecessary travel especially pleasure Tourism and social gatherings. All our public transport systems including Air and Train should strictly adhere to the code of covid protocol.

It is also noted that with Omicron in most of the African Countries there is a sudden increase in children who are getting more infected and admitted to Intensive Care Units. This possibility of enhancing infection in the Paediatric age group is also inevitable, hence IMA appeal to all the schools and colleges shall strictly adhere to the covid protocol and ensure all the adults in the school's milieu to be vaccinated properly. IMA also demands Governments should expedite the proposal for vaccination of children about 12 – 18 years at the earliest.

Thanks to the Government of India and the Ministry of Health, India is ahead in its efforts of preparedness to face the third wave with adequate infrastructure development, treatment protocol, and proactive measures. However, we are still concerned about the manpower shortage in the health care scenario especially with the impending third wave and it is disastrous to note the postponement of NEET PG admission in medical colleges. This will result in a shortage of almost two batches of Post Graduates, one appearing for the exam and one batch waiting for

admission resulting in nearly one lakh of the young resident doctors not available to tackle the crises. IMA demands the Government of India to be proactively involved in this issue of PG admission and ensure without further delay, the PG admission should be done on a war footing. It will be too late if we postpone the PG admission to tackle the Covid crisis.

Through a Press Release issued by IMA HQs. on 18-12-2021, IMA appealed to the public and all concerned that do not get panic and distress but be cautious in adopting the appropriate covid behaviors.

IMA along with its 3.5 lakhs modern medical doctors and its health care infrastructure assures our full-hearted, dedicated services to ensure a safe and protected environment to all our public even in the third wave which is impending in our country.

Thanking you and with kind regards,

Yours sincerely,

Dr. J A Jayalal National President, IMA Dr. Jayesh Lele Honorary Secretary General, IMA

7.12.2021

Smt. Nirmala Sitharaman Hon'ble Finance Minister Ministry of Finance Govt. of India

Email from IMA - Seeking an Appointment to handover IMA's Proposal on National Health Budget

Respected Madam,

Greetings from Indian Medical Association HQs.!

This has reference to our email dated 26.11.2021 regarding the submission of IMA's Proposal on National Health Budge. IMA HQs is ready with its proposal to be submitted to yourself for your kindly consideration.

We seek your appointment on any date and time convenient to you so that we can personally handover the same to you.

Looking forward to meet and hear from you.

Thanking you and with kind regards,

Yours sincerely

Dr. J.A. Jayala National President, IMA

Dr. Jayesh Lele Hony. Secretary General, IMA

Copy to: Secretary, Hon'ble Finance Minister

## IMA CAUTION ON THE IMPENDING OMICRON DISASTERS IN INDIA, BUT NO NEED TO PANIC.

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#### IMA DEMAND FOR QUALITY HEALTH AS FUNDAMENTAL RIGHT

#### **HEALTH AS A FUNDAMENTAL RIGHT:**

The Constitution of India does not expressly guarantee a fundamental right to health. However, there are multiple references in the Constitution to public health and on the role of the State in the provision of healthcare to citizens. The Directive Principles of State Policy in Part IV of the Indian Constitution provides a basis for the right to health. Article 39 (E) directs the State to secure the health of workers, Article 42 directs the State to just and humane conditions of work and maternity relief, Article 47 casts a duty on the State to raise the nutrition levels and standard of living of people and to improve public health. Moreover, the Constitution does not only oblige the State to enhance public health, but it also endows the Panchayats and Municipalities to strengthen public health under Article 243G (read with 11th Schedule, Entry 23). In September 2019, a High-Level Group on the health sector constituted under the 15th Finance Commission had recommended that the right to health be declared as a fundamental right. However, India has to make constitutionally and officially health a fundamental right. In this covid pandemic IMA appeals, the government shall declare health as a fundamental right and makes provision for this in the proposed health budget.

#### INCREASE HEALTH CARE SPENDING IN THE BUDGET:

Every year our Budget, for health only less than 1.5% of GDP is designated against the global average of 8%. India ranks 186th out of 200 countries in Government allocation for health care services. However, the health sector needs more funding as India needs a lot of infrastructure and manpower augmentation in this pandemic era and also needs to percolate to rural areas. In most of the developed countries like the UK and the USA, the nation spends 10-15% of GDP on health. IMA demands minimum of 4 to 5% of our GDP should be designated for Health in the Budget. This demand is there for a long time however, we believe Hon'ble Prime Minister JI who is concerned about the health of the nation will definitely allot more funds for the health care of this country in the forthcoming budget

#### **UNIVERSAL HEALTH CARE:**

IMA appeals to the government for investing more in the public sector infrastructure and human resources as the right way to ensure health as a fundamental right. Government should directly provide healthcare to all citizens. Today private sector meet more than 60% of health care delivery. Basic, Primary and Secondary care services should be available to all in an affordable, accessible, and equitable way. Govt should provide comprehensive health care at all levels below the poverty population. The budget allocation for the fund for primary health care should be higher than for tertiary care. The PHCs and CHCs should be increased in number by refixing the population criteria also with manpower. The ABPMJY should be used exclusively for the purchase of care from the private sector for the BPL segment.

The proposed 1.50 lakhs wellness centers should be started with MBBS graduates with dedicated training and not middle-level practitioners as Wellness Centres also need curative services.

The purity of profession and parity of health care delivery is the mandatory ingredient of health care for all. Digital health and telemedicine shall be promoted on hybrid mode. The Ayushman Bharat shall include OPD services, rural hospitals, and family clinics also.

IMA believes for health to become a fundamental right it should be directly administrated through the Government instead of having health insurance companies and TPA.

#### FAMILY MEDICINE CONCEPT:

IMA demands the Government to promote the family medicine concept in India to the maximum possible level. India is the birthplace of the family medicine concept and makes sure all our PHC and CHC are manned by the family physician and in every medical college, a department of family medicine should be started. In this era of stress and strain, the family medicine department can definitely take up to millions of people and thereby reduce the overburden in the tertiary health centers. Without an exclusive Family Medicine Department at the undergraduate level, it will not be possible to develop Family Medicine specialists in Post Graduate level

#### INDIAN MEDICAL SERVICES:

The Indian Medical Service which served India so well almost for the last 300 years was abolished in 1947. The COVID pandemic has exposed the vulnerability of the healthcare system. It has also brought to fore the grave paucity of professionalism in health management right from the Sub-District Office level. There is an

acute need for a drastic but holistic change in the health administration of the country by creating a specialized cadre of health administrators who would be holding administrative responsibilities. The Study Group constituted by the then MCI in the year 2017 has very positively reported the need for the creation of the Indian Medical Service for the purpose of confirming the desired need of urgent galvanization of the health care of the country. The structure of the Indian Medical Service should be in the form of a cadre specialized in character for the dispensation of health care services including those in the domain of public health excluding the domain of medical education in its entirety as All Indian civil services emanating out of All India Service Act in 1951.

#### INTERVENTION IN DRUGS AND MEDICAL DEVICES:

The government might also facilitate private-sector investments in the domestic medical device and branded pharmaceutical sectors to promote more local innovation and reduce dependence on more expensive, imported products and raw material as per the vision of Atma Nirbhar Bharat of Hon'ble Prime Minister Ji.

#### GOODS AND SERVICE TAX (GST):

Currently, GST Paid on inputs, input service and capital goods used for healthcare services is not eligible for an input tax credit since the output service is exempt. IMA requests the Government to consider zero-rating & ensure that the input tax credit chain is intact and also the input taxes are not loaded into the cost of healthcare services and also requesting the Government to reduce the rate of GST which is now @ 18% to less than 5% on all health care types of equipment.

#### HEALTH CARE INFRASTRUCTURE IN RURAL AREAS:

India has an average of 7 beds per 10,000 population against the global average of 27. This is still low in rural India. IMA demands the family clinics and middle-level health sectors are of paramount importance to tackle the needs of the people in rural and urban areas. The policy of the government should ensure special concessions is made available in the form of providing tax exemption, due, electrical and water concessions, the primary education model salary to health workers and soft loans for creating sub-centers in the remote areas, Special package, and incentives shall be allotted in the health budget, with time-bound scale.

IMA welcomes the move of the Government to spend more on the Digital Health Missions, however, IMA demands digital health is only part of the health care access. A proper rural infrastructure physical contact allotment is the ultimate goal and objective of the Government.

#### **MANPOWER:**

IMA request the government to skew the distribution of medical colleges only in needed areas and not going on initiating the colleges in the metro. There is an acute need for Paramedical and allied health persons and more and more hospitals shall be promoted to train quality paramedical people. The system of NEET-PG results in lakes of students spending their fruitful time in the preparation of exams for years together should be streamlined. The simulation lab of high quality shall be independently created in each state for the medical students to have accredited quality learning.

#### NCD (NON-COMMUNICABLE DISEASE):

NCD is causing 75% of disease and death, which is caused by cardiac, pulmonary, Diabetic, and Cancer diseases and mainly by the lifestyle habits of smoking, alcohol, and being overweight. Many NCD is diagnosed not early and they come for treatment in late-stage, causing greater exchequer expenditure in managing them. In this budget, we demand strict control on the sale of cigarettes and alcohol along with the strict implementation of food safety to be incorporated. For promoting early detection of NCD, a special tax concession plan of Rs. 10,000 to 15,000 in the cumulative calculation of individual IT returns shall be given, provided the amount is used for preventive health Check-ups so as to enable early diagnosis of NCD.

#### WATER AND ENVIRONMENTAL POLLUTION:

Health needs good nutrition, sanitary water, a safe environment, and pure air to breathe. These pillars shall be brought under health ministry and with focused dedicated budget allocation, stringent measures to be taken make pure water and air available to all. Pollution including noise pollution kills and produces morbidity for many. One lake newborn children are deaf, but if detected early, it is correctible. Special budget provision shall be made available for this

IMA Believes and hopes with great expectation this Budget of GOI will allot and designate more funds for health care especially on proper health care infrastructure, manpower augmentation, declare health as a fundamental right and adopt the Indian Medical Service cadre to monitor it.

# IMA REQUEST OUR HON'BLE PRIME MINISTER OF INDIA TO RESOLVE PG COUNSELLING CRISIS AND AUGMENT MANPOWER TO FACE IMMINENT 3RD WAVE.

Indian Medical Association is concerned about the ongoing strike of the Resident doctors and their genuine demands for expediting the PG counselling. It is pertinent to note that original NEET PG exam was scheduled in January 2021 but postponed in view of 1st and 2nd wave of Covid and held on 12th September, 2021. However, due to the legal impediments of the Supreme Court now the Counselling is withheld resulting in shortage of 45000 doctors in the frontline. Indian Medical Association has constantly raising the issue of the manpower development in the Covid care in particular and in healthcare delivery system in total. When the exam was postponed in January 2021, IMA has demanded as NEET PG exams are conducted to select Resident doctors for working as frontline warriors to face covid patients the exam should not be postponed in the pretext of Covid. As the NEET PG Exam was not held in January 2021, the aggressive 2nd wave was handled by limited manpower of doctors and resulted in loss of more than 2000 Nobel professional souls in the Covid war. At that time 1,60,000 doctors were appearing for the exams and waiting for the examination to be held relentlessly for the 8 months, without involving in the Covid care.

Now, in view of the impending 3rd wave, if this PG counselling is not held, with the limited manpower, it will be too difficult to handle the 3rd wave in our Country.

We express our gratitude to Hon'ble Prime Minister for making so much of infrastructure development and we appeal once again that Hon'ble Prime Minister should personally intervene and help the country to built manpower. The Resident doctors are raising the genuine demands and till now it is not properly resolved. IMA is in pain to see our younger children are forced to be in the streets, fighting for the cause of the community and genuine interest of the Covid care of our country. IMA demands the issues of reservation policy which is the prerogative of the Government shall not be mixed with the schedule of the counselling and the larger decisions of that reservation shall be taken at appropriate time on the successive counselling. So, on behalf of the 3.5 lacs doctors of this country, we explicitly express our moral support to the resident doctors who are fighting for the rights and we herewith request the Hon'ble Ministry of Health to resolve this matter quickly with the compassionate advice and intervention of Hon'ble Prime Minister to restore normalcy lest Indian Medical Association will be forced to adopt direct democratic participation along with the Resident doctors. IMA is hoping for the immediate redressing of our demands by the Hon'ble Ministry of Health to start PG Counselling.

Dr. J A Jayalal National President, IMA



#### **INDIAN MEDICAL ASSOCIATION**

IMA House, I P Marg, New Delhi – 110 002 Ph.: +91-11-2337 0009, 2337 8680, 2337 8819, 2337 0250 Website: www.ima-india.org, Email: hsg@ima-india.org, Email: paramedicalcoursesima@gmail.com

#### **PARAMEDICAL COURSES**

Indian Medical Association conducts the following Paramedical courses:

- 1. Diploma in Medical Laboratory Technology
- 2. Diploma in X-RAY/IMAGING Technology
- 3. Diploma in O.T. Technician
- 4. Diploma in Medical Record Technology
- 5. Diploma in Cardiac Technology
- 6. Diploma in Dialysis Technician
- Certificate Course in Blood Bank Technology 7.
- Certificate Course in CT 8.
- 9. Certificate Course in MRI
- 10. Certificate Course in CT and MRI
- Certificate Course in Phlebotomy Technician 11.

**Duration:** Two years for Diploma courses. Six months and one year for Certificate courses.

Eligibility Criteria: (i) 10+2 with 40% with science stream (Physics, Chemistry, Biology, Mathematics, Agriculture, etc.) for Diploma courses.

(ii) 10+2 from any other stream with minimum 50% of aggregate marks with an undertaking / Affidavit from the students.

For certificate in Blood bank course, eligibility criteria is DMLT, B.Sc. MLT, B.Sc (Micro). For CT and MRI courses, eligibility criteria is two or three years Degree/Diploma in Radiography with internship. for Phlebotomy course eligibility criteria is 10 +2 science stream with 40 % marks.

IMA Paramedical Diploma courses are recognized by Govt. of NCT of Delhi, Department of Health and Family Welfare.

Diploma in Medical Laboratory Technology and Diploma in X-RAY/IMAGING Technology both are also running jointly by National Institute of Open Schooling(NIOS), Ministry of HRD, Govt. of India, Noida (U. P.) and Indian Medical Association HQs., New Delhi.

#### For details, please contact or write to:

Dr. J A Jayalal National President, IMA

Dr. Jayesh M Lele HSG, IMA & Dean, IMA Para Medical

22 November 2021 www.ima-india.org







IMA organized a special award ceremony to honour "Academic Entrepreneurship Excellence Award" for those who have contributed for the wellness and growth of the academic atmosphere in our country on 19th December, 2021 at IMA HQs, New Delhi. Dr. Minu Bajpai, Hony. Executive Director, National Board of Examinations in Medical Sciences and Dr. Arun Gupta, President, Delhi Medical Council were the Guest of Honour. 22 Medical Professionals of eminence were awarded during the Award Ceremony.





Inauguration of the newly renovated office complex at 2nd Floor of IMA HQs. Building was inaugurated by the National President, IMA, Dr J A Jayalal on 23rd December 2021. The Office-Bearers of IMA HQs along with leaders of IMA were present during the inauguration function.

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# INDIAN MEDICAL ASSOCIATION



1800+ Modern Medicine Doctors have sacrificed their lives in the service of the nation in the Covid-19 pandemic. Many have left behind families and children who require help for sustenance, education and upbringing.

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Dr. Ketan Desai Past President, WMA Dr. J. A. Jayalal National President, IMA Dr. Jayesh Lele Honorary Secretary General, IMA Dr. Anil Goyal Honorary Finance Secretary, IMA

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